		CLAIMS AS	(Colum		(Colur	mn 2)	SMA TYP	LL EN	шт <u>ч</u>	OR	OTHER SMALL	
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FOF			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	E 355.00	OR	Basic Fee	710.00
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(0	8-25	(Column 1)		(Coli	ımı 2)	(Column 3)	ADD		=			
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Application or Docket Number